

PAGE	1	OF	3
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00487470 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M</div> <div style="margin: 0 5px;">/</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D</div> <div style="margin: 0 5px;">/</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y</div> </div>	

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 28 / 2014	
Mailing Address 2001 L St., NW, Ste. 600		Amount 81.79	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.45321
Purpose of Expenditure mail production costs (from advance line 21)	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 28 / 2014	
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought	2226997.46	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>05 / 28 / 2014</div> </div>	
Mailing Address 2001 L St., NW, Ste. 600		Amount <div> <div>_____</div> <div>81.79</div> </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.45322 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>05 / 28 / 2014</div> </div>
Purpose of Expenditure mail production costs (from advance line 21)		Category/ Type <div>_____</div>	
Name of Federal Candidate CHRIS MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>_____</div> <div>2227079.25</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	163.58
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

MM / DD / YYYY